



**CDC's Public Health Grand Rounds Presents:**  
**"Public Health Strategies to Prevent Preterm Birth"**

Monday, November 16, 2015

10:00 a.m. – 11:00 a.m., ET

Global Communications Center (Building 19)

Alexander D. Langmuir Auditorium

Roybal Campus

During the final months of pregnancy, a growing baby goes through important stages of development. The earlier a baby is born, the higher the risk of death or serious disability. Preterm birth, the birth of an infant before 37 weeks of pregnancy, is the largest contributor to infant death. Infants born before 32 weeks gestation bear the biggest burden – representing more than 50 percent of infant deaths. Premature births also pose a long-lasting financial burden on the individual, their families and society. In 2005, the Institute of Medicine reported that each year the cost associated with premature birth in the United States was over \$26 billion.

Since 1990, the nation's overall infant mortality rate has declined nearly 35 percent and the rate of preterm births decreased to 11.3 percent in 2013. However, these national declines have not erased racial disparities within the US. Preterm-related causes of death are more than three times higher for black infants than for white infants. Disparities are also seen for Native American infants.

Preterm birth is complex and remains a challenge because its causes are numerous, and poorly understood. Modern technology and stronger public health strategies have made a significant impact in reducing preterm births and infant mortality. However, we still have a lot to learn about the causes of premature birth in order to prevent it and protect the youngest members of our society, especially among racial and ethnic minorities.

In this session of Grand Rounds presenters will discuss how concerted efforts to improve surveillance data, better medical care and prevention, and stronger public health partnerships, can accelerate progress in reducing preterm births and improving neonatal outcomes.

**Presented By:**

**Wanda Barfield, MD, MPH**

*Director, Division of Reproductive Health*

National Center for Chronic Disease Prevention and Health Promotion, CDC

**"Preterm Birth in the United States: Where We Stand"**

**Arthur James, MD**

*Associate Clinical Professor, Department of Obstetrics and Gynecology*

Ohio State University Wexner Medical Center

## **“Tackling the U.S. Black and White Racial Disparity in Infant Mortality”**

**Zsakeba Henderson, MD**

*Medical Officer, Division of Reproductive Health*

National Center for Chronic Disease Prevention and Health Promotion, CDC

## **“Preventing Preterm Birth One State at a Time: Perinatal Quality Improvement Collaboratives”**

**Jennifer L. Howse, PhD**

*President*

March of Dimes Foundation

## **“The 2030 Goal: Public-Private Partnerships to Prevent Preterm Birth”**

### **Facilitated By:**

**John Iskander, MD, MPH, *Scientific Director, Public Health Grand Rounds***

**Phoebe Thorpe, MD, MPH, *Deputy Scientific Director, Public Health Grand Rounds***

**Susan Laird, MSN, RN, *Communications Director, Public Health Grand Rounds***

### **Continuing Education for Grand Rounds**

ALL Continuing Education hours for Public Health Grand Rounds (PHGR) are issued online through the [CDC/ATSDR Training and Continuing Education Online system](#). If you have questions, [e-mail](#) or call Learner Support at 1-800-418-7246 (1-800-41TRAIN).

Those who attend PHGR either in person, Envision, IPTV, or “web on demand” and who wish to receive continuing education must complete the online seminar evaluation. Thirty days from the initial seminar the course number will change to WD2346 and will be available for continuing education until February 18, 2016. The course code for PHGR is **PHGR10**.

Target Audience: Physicians, nurses, epidemiologists, pharmacists, veterinarians, certified health education specialists, laboratorians, others

### **Objectives:**

1. List key measures of burden of disease involving morbidity, mortality, and/or cost.
2. Describe evidence-based preventive interventions and the status of their implementations.
3. Identify one key prevention science research gap.
4. Name one key indicator by which progress and meeting prevention goals is measured.

CE certificates can be printed from your computer immediately upon completion of your online evaluation. A cumulative transcript of all CDC/ATSDR CE's obtained through the TCE Online System will be maintained for each user. We hope that this will assist CDC staff and other public health professionals to fulfill the requirements for their professional licenses and certificates.

### **For Continuing Medical Education for Physicians (CME):**

The Centers for Disease Control and Prevention is accredited by the Accreditation Council for Continuing Medical Education (ACCME®) to provide continuing medical education for physicians.

The Centers for Disease Control and Prevention designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

**For Continuing Nursing Education for Nurses (CNE):**

The Centers for Disease Control and Prevention is accredited as a provider of Continuing Nursing Education by the American Nurses Credentialing Center's Commission on Accreditation.

This activity provides 1.0 contact hours.

**For Continuing Education Contact Hours in Health Education (CECH):**

Sponsored by the *Centers for Disease Control and Prevention*, a designated provider of continuing education contact hours (CECH) in health education by the National Commission for Health Education Credentialing, Inc. This program is designated for Certified Health Education Specialists (CHES) to receive up to **1.0** Category I CECH in health education. CDC provider number **GA0082**.

**IACET Continuing Education Units (CEU):**

The CDC has been approved as an Authorized Provider by the International Association for Continuing Education and Training (IACET), 1760 Old Meadow Road, Suite 500, McLean, VA 22102. The CDC is authorized by IACET to offer **0.1** ANSI/IACET CEU's for this program.

**For Continuing Pharmacy Education (CPE):**

(For EV2346 (SC) - live course)

The Centers for Disease Control and Prevention is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program is a designated event for pharmacists to receive 1.0 Contact Hours in pharmacy education. The Universal Activity Number is 0387-0000-15-164-L04-P.

(For WD2346 -Web on demand)

The Centers for Disease Control and Prevention is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program is a designated event for pharmacists to receive 1.0 Contact Hours in pharmacy education. The Universal Activity Number is 0387-0000-15-164-H04-P.

Course Category: This activity has been designated as knowledge-based.

There is no cost for this program.

In compliance with continuing education requirements, all presenters must disclose any financial or other associations with the manufacturers of commercial products, suppliers of commercial services, or commercial supporters as well as any use of unlabeled product(s) or product(s) under investigational use. CDC, our planners, and the presenters for this seminar do not have financial or other associations with the manufacturers of commercial products, suppliers of commercial services, or commercial supporters. This presentation does not involve the unlabeled use of a product or product under investigational use. CDC does not accept commercial support.